eet all three tests for Yes No 💢	a spouse or dependent child because they me	med" income, or liabilities of ommittee on Ethics.	EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
Have you excluded Yes No 🔀	other "excepted trusts" need not be disclosed.	nittee on Ethics and certain cendent child?	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?
OF THESE QUESTIONS	· _	IST INFORMATIO	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH
QUIRED TO COMPLETE	STHAT YOU ARE REQUIRED TO	Y THE SCHEDULES	THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE RE
\$"	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	RRESPONDING SC	ATTACH THE CO
an \$5,000 from a Yes No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes X No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
r arrangement with an Yes X No	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes X No	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
ng the reporting ves No No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes No	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?
	TIONS	OF THESE QUES	PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS
A \$200 penalty shall be assessed against any individual who files more than 30 days late.	Period Covered: January 1, 2017 to Nascely 31, 2018.	Staff Filer Type (If Applicable): Shared Principal Assistant	New Officer or Employee St Employing Office: St
(Office Use Only)	Check if Amendment	2he	New Member of or Candidate for State:
OFFICE OF THE CHECK U.S. HOUSE OF REPRESENTATIVES	⊼	_ Daytime Telepho	Name: Aftab Rireval
Page 1 of 5	FORM B For New Members, Candidates, and New Employees		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Ochnock Internation	Skybrobe Dividend	Bankof America - Start	Nation, LLC	USBOOK	ABC Hedge Fund X	Examples: Simon & Schuster	Mega Corp Stock	C#	income source is that of your spouse (SP) or dependent child (CC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements,	Investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or	You have a privately-traded fund that is an Excepted	Exclude: Your personal residence, including second loames and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income detended from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete address or description, e.g., rental property," and a city and state.	all interest-bearing accounts, if the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	account disc exceeds the reporting directions.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Identity (a) each asset held for investment or production of income and with a fair market value exceeding \$1.000 at the end of the reporting period, and (i) any other reportable esset or source of income which generated more than \$200 in "uneamed" income during the year.	Assets and/or Income Sources	BLOCK A
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					Partnership Income	Royalties		0	r Type of Income	(Specify:	8.g.,	Partnership Incor	ne or Farm Inco	me)				"None" if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, threarest, and capital gains, even if reinvested, must be disclosed as income for asserts held in taxable accounts. Check		
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<u></u>	<u> </u>					ļ	_	_	se/DC Income o	rer \$1,000	,000	r 			¥	Н	•		For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, Interest, and capital gains, even if rehrvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated. "Column XII is for assets held by your spouse or dependent child in which you have no interest.	Amount of Income	BLOCK D
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE C - EARNED INCOME

Name: After Pureval Page 4 of 6

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria) ABC Trade Association, Baltimore, MD (July 15) Examples: State of Maryland Graffing (Graff)	Type Honorarium Salary	Current Year to Filing	Amount Preceding Year \$500 \$75,000
1-Amnilton County Clerk of Courts	Salary	\$27,750	\$11000

SCHEDULE D - LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child

		DC JT Sp.		
Cond	Example			
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Slos Student-Loun	Mortgage on Rental Property, Dover, DE	Type of Liability		!
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		Over \$1,000,000* (Spouse/DC Liability)	~	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fratemal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Position Name of Organization
Counsel	Procter and Gamble - champator Ot)
Member	Nation, LLC - Comment OH
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SCHEDULE F - AGREEMENTS

Name: After Rosewl Page_ 6 잌

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties to Agreement	Terms of Agreement
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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

good and any invintaged continue may as a result of a privilegen relationship recognized by taw. Lo not repeat in	а римпедеч (спациями) геобриден вучами. Во постараж инфинация извеч оп эспация с.
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services